





State of Washington Application for a Water Right PEPT. OF ECOLOGY

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use	
Fee Paid/10 - 9	7
Date //. 3.95	/

	NAVAL RA	DIO STATIO	N (T)	JIM CREEK	Hom	e Tel:(
Mailing Ad	dress 210	27 JIM CRE	EK ROA	AD	Worl	k Tel:(20	06) 3	04	5301
cityARL	INGTON	Sta	ite WA	Zip+4_98223	+_8599	_FAX:(206)3	04	5306
	2. CON e as abov		ERSO	ON TO CALI	ABOUT	THE	APPL	ICAT	ION
lame_OFF	'ICER-IN-C	HARGE				4			
		ME AS ABOV							
ity		Sta	ite	_ Zip+4	+	_FAX:	206)3	045_	306
elationship	to applican	tNAV	Y REPI	RESENTATIVE					
Section	3. STAT	EMENT	OF I	NTENT					
cubic feed urpose(s) of escription	of the place	l) from a \square s STIC/PUBLIC of use. (See	surface C SUPI instru	water source or ctions.) NOTE: A	ground w	number	rce (checorder a plat	Attach number	one) for the
	ded:			e don ew ex s				time th	at the water will be
Section		ER SOUR			NOT	APPLIC	;ABLE		
		ER SOUF			f GROUNI				
If SURFANAME the lake, etc.	4. WAT	ER SOUF ER e and indicate , write "unna	RCE	am, spring,		OWATE	≅R	1 v	vell(s).
If SURFA Name the lake, etc. "unnamed	4. WAT	ER SOUF ER e and indicate , write "unna	RCE	am, spring,	f GROUNI	OWATE	≅R	1 v	vell(s).
If SURFA Name the lake, etc. "unnamed Number o	4. WAT ACE WATI water source If unnamed stream," etc.	ER SOUF ER e and indicate , write "unna	e if stre	eam, spring, oring,"	f GROUNI A permit is d	DWATE	er	1 v	vell(s).
If SURFA Name the lake, etc. "unnamed Number o	4. WAT ACE WATI water source If unnamed, stream," etc. f diversions:	ER SOUF e and indicate , write "unna	e if stre	eam, spring, oring,"	f GROUNI A permit is d	DWATE lesired for of well-	er		vell(s).
If SURFANAME the lake, etc. "unnamed Number of Source flood LOCATION Enter the nearest seems."	4. WAT ACE WATI water source If unnamed stream," etc. f diversions: ows into (name)	ER SOUF e and indicate , write "unna :: N/A ne of body of	e if stre med sp f water)	eam, spring, oring,"	f GROUNI A permit is d Size & depth	DWATE lesired for of wellow 126'	er	*	
If SURFANAME the lake, etc. "unnamed Number of Source flood LOCATION Enter the nearest seems."	4. WAT ACE WATI water source If unnamed, stream," etc. f diversions: ows into (name) ON north-south ection corne	ER SOUF e and indicate , write "unna :: N/A ne of body of	e if stre med sp f water)	am, spring, rring,"	f GROUNI A permit is d Size & depth	DWATE lesired for of wellow 126'	ER or (s):	or withou	drawal to the
If SURFANAME the lake, etc. "unnamed Number of Source flood LOCATION Enter the nearest see	4. WAT ACE WATI water source If unnamed, stream," etc. f diversions: ows into (name) ON north-south ection corne	ER SOUF e and indicate , write "unna :: N/A ne of body of	e if stre med sp f water)	stances in feet from SEE ATTACHED	f GROUNI A permit is d Size & depth	DWATE lesired for wellow 126'	ER or (s):	or withou	Irawal to the
If SURFANAME the lake, etc. "unnamed Number of Source flood LOCATI Enter the nearest sea ACTIVITY	4. WAT Water source If unnamed stream," etc. f diversions: ws into (name) ON north-southection corner RESPOND:	ER SOUF e and indicate , write "unna :: N/A ne of body of n and east-wer:	e if stre med sp water)	sam, spring, oring, ori	f GROUNI A permit is d Size & depth 8" >	DWATE lesired for of wellow 126'	ersion o	or without	drawal to the

ECY 040-1-14 Rev. 12/94 F

APPLICATION

G1. 27674 Appl. No.:

Sec	uon 5. GENERAL WATER SYSTEM	M INFORM	ATTON	
A.	Name of system, if named: U.S. NAVAL RA	ADIO STATION	(T) JIM CREEK	
B.	Briefly describe your proposed water system. (§	See instructions	<u>s</u> .)	
	Drilled well followed by ozone inject Manganese and Iron. Ozone residual a 2-3 times per week.	tion and mulacting as di	ti-media filtrati sinfectant. Wate	on to remove r pumped manually
	* * * * * * * * * * * * * * * * * * * *			
C.	Do you already have any water rights or claims PROVIDE DOCUMENTATION.	associated with	this property or syste	m? □ YES 🗷 NO
	tion 6. DOMESTIC / PUBLIC WAT mpleted for all domestic/public supply		Y SYSTEM INF	ORMATION
Α.	Number of "connections" requested: 30	Type of conn	ection HOME/OFFIC	E/RECREATIONAL
В.	Number of "connections" requested: 30	untom?	(Homes, Aparti	nent, Recreational, etc.)
D.	Are you within the area of an approved water sy If yes, explain why you are unable to connect to your County Health Department.		lote: Regional water s	□ YES ☒ NO vstems are identified by
Com	plete C. and D. only if the proposed wa	ter system v	vill have fifteen or	more connections.
C.	Do you have a current water system plan approv	ved by the		
С.	Washington State Department of Health?	red by the		☐ YES 🎞 NO
	If yes, when was it approved?	_ Please attach	the current approved	version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved?	Please attach	the current approved	☐ YES XX NO
	tion 7. IRRIGATION/AGRICULTU implete for all irrigation and agricultur		I INFORMATIC	N
A.	Total number of acres to be irrigated:			
В.	List total number of acres for other specified ag	ricultural uses:		NOT APPLICABLE
	The American			
	Use Acres			
	Use Acres Use Acres			
C.				
C.	Total number of acres to be covered by this app	neation;		
D.	Family Farm Act (Initiative Measure Number 59) Add up the acreage in which you have a control ‡ Acreage irrigated under water rights a ‡ Acreage proposed to be irrigated under ‡ Acreage proposed to be irrigated under	lling interest, in acquired after D er this application	eccember 8, 1977; on;	
	 Is the combined acreage greater than 20. Do you have a controlling interest in a I 	00 acres?	Marine Blanco	□ YES □ NO □ YES □ NO
	If yes, enter permit no:			
E.	Farm uses: Stockwater - Total # of animals Dairy - # Milking # Non-milking	Animal type	(If dair	y cattle, see below)
	Daily - # Minking# Mon-minking		DENT OF ECOLOGY	
			MOA -3 1532	
	LAPP	LICATION	RECOVED	

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? EXISTING 250,000 GAL FINISHED WATER STORAGE TANK

X YES D NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

- TRAVEL NORTH ON 1-5, EXIT @ #208, TURN RIGHT
- DRIVE APPROXIMATELY 8 MILES EAST 2.
- TURN RIGHT ON JIM CREEK ROAD AND TRAVEL APPROXIMATELY 7 1/2 MILES TO NAVRADSTA (T) JIM CREEK

Section 10. REQUIRED MAP

Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

Α.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name.	X□ YES □ NO (s) and address(es) of the
	owner(s):	

Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

X YES NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with

HQNAU COMTEL COM 4401 Massachusetts Ave, Wash, DC
Landowner for place of use (if same as applicant, write "same")

Date

Date

We are returning your application for the following rea	son(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested about the additional information requested about the control of the contro		application by

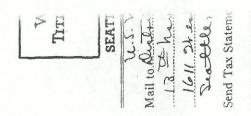
Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

Statutor

DEC 1.



937706

Statutory Warranty Deed

VOL 444 PAGE 330

FORM L58

THE GRANTORS AUGUST MATTSON and MOLLY MATTSON, husband and wife at time of acquiring title and at all times since

for and in consideration of Ninety Six Hundred and no/100 (\$9,600.00)

in hand paid, conveys and warrants to THE UNITED STATES OF AMERICA and ITS ASSIGNS

the following described real estate, situated in the County of Snohomish Washington:

, State of

The Southeast quarter of the Northwest quarter; the North half of the Northeast quarter of the Southwest quarter; and the South half of the Northwest quarter of the Northwest quarter; all in Section thirty-two (32), Township thirty-two (32) North, Range seven (7) East, W.M.









Dated this

23rd

day of

November

1949

STATE OF EASHINGTON,

maly matter (SEAL)

On this day personally appeared before me August Mattson and Molly Mattson

to me known to be the individuals described in and who executed the within and foregoing instrument, and acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purposes therein mentioned.

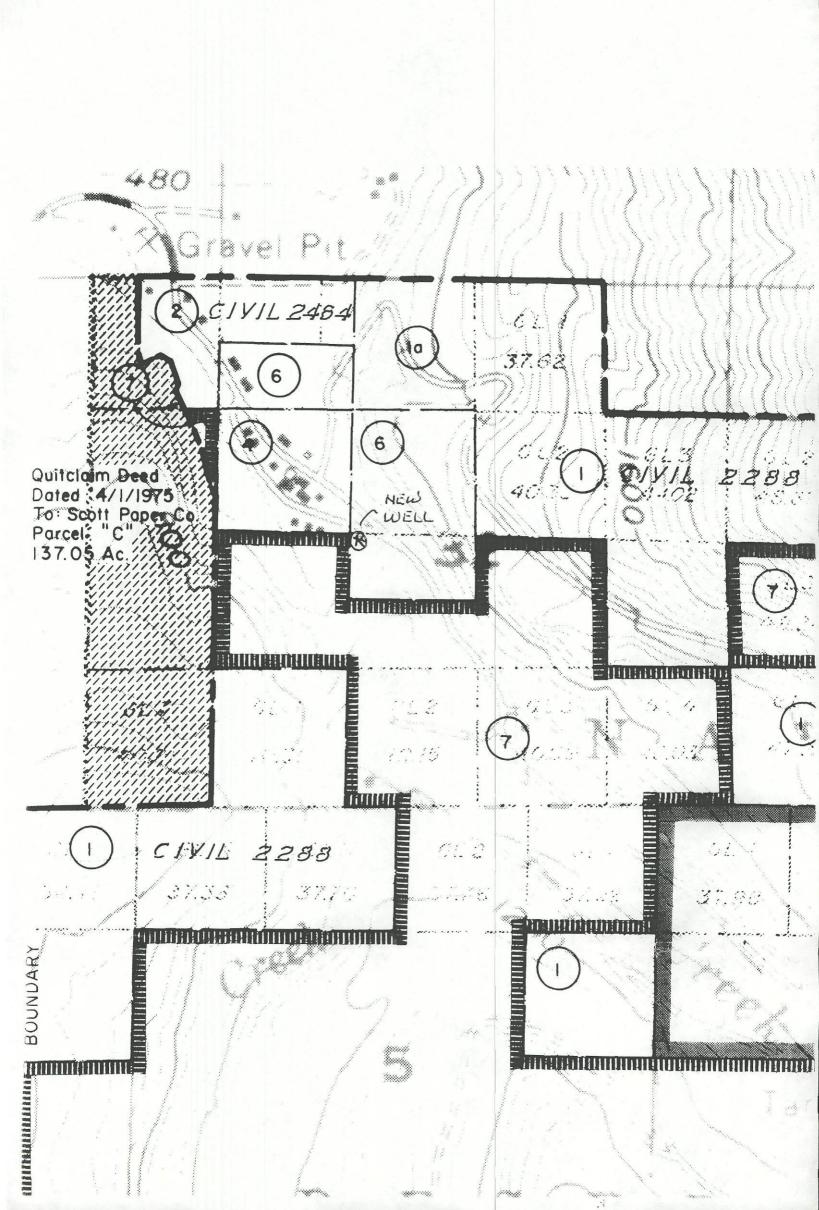
GIVEN under my hand and official seal this 23rd

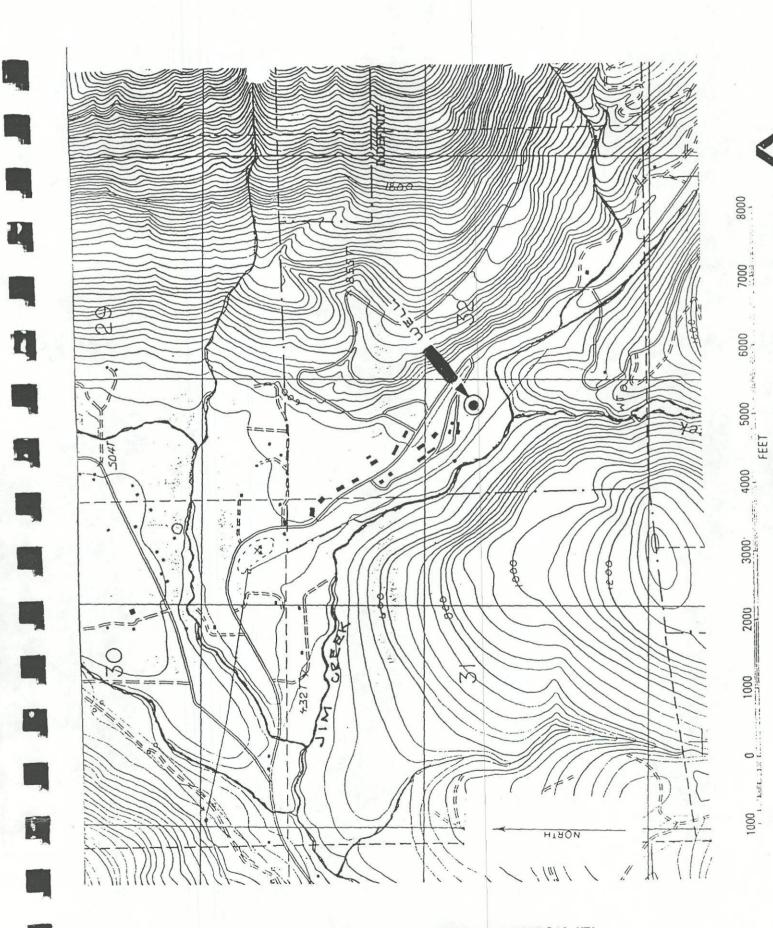
November

1945

Notary Public in and for the State of Washington, residing at Seattle

End (1)





JIM CREEK NAVAL RADIO STATION (T) OSO, SNOHOMISH COUNTY, WA.

ENCL (4)

